

Attorney Docket No. SEL 259  
**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**  
**PATENT APPLICATION TRANSMITTAL LETTER**

J1045 U.S. PRO  
09/852220  
05/09/01

Transmitted herewith for filing is the patent application of:

1. Inventor(s): Shunpei YAMAZAKI, Jun KOYAMA and Toru TAKAYAMA

2. Title: Light-Emitting Device And Electric Appliance

Name of applicant(s) and current correspondence address of applicant(s)

Name: Shunpei YAMAZAKI  
Citizenship: Japanese  
Residence Tokyo, Japan  
Mailing Address: c/o Semiconductor Energy Laboratories, Co., Ltd., 398, Hase, Atsugi-shi, Kanagawa-ken 243-0036 Japan

Name: Jun KOYAMA  
Citizenship: Japanese  
Residence Kanagawa, Japan  
Mailing Address: c/o Semiconductor Energy Laboratories, Co., Ltd., 398, Hase, Atsugi-shi, Kanagawa-ken 243-0036 Japan

Name: Toru TAKAYAMA  
Citizenship: Japanese  
Residence Kanagawa, Japan  
Mailing Address: c/o Semiconductor Energy Laboratories, Co., Ltd., 398, Hase, Atsugi-shi, Kanagawa-ken 243-0036 Japan

Enclosed are:

X 19 Sheets of Drawings

X Formal  
       Informal

       Assignment of invention to \_\_\_\_\_

X 39 Pages of Specification

X 7 Pages of Claims

X Abstract of The Disclosure  
       Statement of Small Entity  
       Declaration and Power of Attorney  
X Information Disclosure Statement  
X Appointment of Associate Attorneys  
       Preliminary Amendment A

Applicant claims priority under 35 USC §119 to the following foreign application:

Serial no. 2000-140043 filed May 12, 2000 in Japan.

X A certified copy of this priority document is enclosed herewith.  
       Please enter the attached amendment before calculating the fees.

**Claims as Filed**

	Number Filed		Number Extra	Rate	Fee
Total	45	-20	25	(small entity) x 9 (others) x 18	\$450.00
Independent	9	-3	6	(small entity) x 40 (others) x 80	\$480.00
Multiple Dependent	No			(small entity) x 135 (others) x 270	\$0.00
Basic Fee				(small entity) x 355 (others) x 710	\$710.00
Assignment					\$0.00
<b>Total Fee</b>					<b>\$1640.00</b>

Please charge my Deposit Account No. 50/1039 in the amount of \$ \_\_\_\_\_. A duplicate copy of this sheet is enclosed.

X The Commissioner is hereby authorized to charge any additional fees (except the issue fee) which may be required at any time during the prosecution of this application without specific authorization, or credit any overpayment to Deposit Account No. 50/1039. A duplicate copy of this sheet is enclosed.

X A check in the amount of \$1640.00 is enclosed to cover the filing fee and the recordation of the Assignment, if any, transmitted herewith.

Date: May 3, 2001



Mark J. Murphy  
Registration No.: 34,225  
COOK, ALEX, MCFARRON, MANZO,  
CUMMINGS & MEHLER, LTD.  
200 West Adams St.  
Suite 2850  
Chicago, Illinois 60606  
(312) 236-8500

"Express Mail" Mailing Label No. EL 828220309

Date of Deposit May 9, 2001

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to: Commissioner for Patients, Washington, D.C. 20231

Name ARMANDO CHING  
(typed or printed)

Signature Armando M-C